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CONFIRMATION NO. 3353

Hitachi: Globe

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|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/761,698 | FILING OR 371(c) DATE 01/20/2004 RULE | CLASS 360 | GROUP ART UNIT 2627 | ATTORNEY DOCKET NO. HSJ9-2003-0235US1 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS

Hardayal Singh Gill, Palo Alto, CA; *Ch*** CONTINUING DATA ***** *N/A Ch*** FOREIGN APPLICATIONS ***** *N/A Ch*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/23/2004

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|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 4 | TOTAL CLAIMS 21 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature <i>Ch</i> Initials | | | | |

ADDRESS

32112

TITLE

Stabilization structure for CPP GMR/TV

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| FILING FEE RECEIVED 788 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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